This sheet must be completed if entering Division II - Flowers

Flower Growing Information Sheet

Name of Plant	Date Planted	Annual, Biennial or Perenial	Border, Bedding, or General Garden

1. How did you use your flowers? (sale of, exhibits, bouquets, etc.)

_____

_____

2. What growing practices did you need to use regarding fertilizer, mulching, and insect control?

_____

_____

3. Which experiences were most interesting in this project? _____

_____